

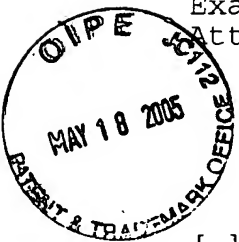
**FEE TRANSMITTAL**

05/19/05

AFS  
JW

Application Number 10/606,027  
Filing Date June 25, 2003  
Inventor(s) Robert A. Holton  
Examiner Name Ba K. Trinh  
Attorney Docket Number FSUM 10466.59

Art Unit 1626  
Confirmation No. 3976



☐ Applicant claims small entity status.

**METHOD OF PAYMENT**

- ☐ The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.
- ☒ Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

**FEE CALCULATION**

1. ☐ BASIC FILING, SEARCH AND EXAMINATION FEES  
(Type: \_\_\_\_\_) Subtotal (1) \$ \_\_\_\_\_

2. ☐ EXCESS CLAIM FEES

Total Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_\_  
Indep Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_\_  
Multiple Dependent Claims Fee \$ \_\_\_\_\_  
(HP = highest number of claims paid for)

Subtotal (2) \$ \_\_\_\_\_

3. ☐ APPLICATION SIZE FEE

Total Pages \_\_\_\_ - 100 = \_\_\_\_ ÷ 50 = \_\_\_\_ x \$250 = \$ \_\_\_\_\_  
(Application + Drawings) (round up to whole #)

Subtotal (3) \$ \_\_\_\_\_

4. ☒ OTHER FEE(S)

- ☒ 2nd month extension of time \$450.00  
☐ Information disclosure statement  
☐ 37 CFR 1.17(q) processing fee  
☐ Non-English specification  
☐ Notice of Appeal  
☒ Filing a brief in support of appeal \$500.00  
☐ Request for oral hearing  
☐ Other: \_\_\_\_\_

Subtotal (4) \$ 950.00

**TOTAL AMOUNT OF PAYMENT** \$ 950.00

Janet S. Hendrickson, Ph.D., Reg. No. 55,258  
Telephone: 314-231-5400

5/18/05  
Date

JSH/dep  
Express Mail Label No. EV621123925US

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450.00 OP  
02 FC:1252